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RULE				

APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/US03/31974 10/08/2003 which is a CIP of 10/287,994 11/05/2002 which is a CON of PCT/US02/32263 10/09/2002 and claims benefit of 60/407,527 08/28/2002 and claims benefit of 60/404,249 08/16/2002 and claims benefit of 60/396,594 07/17/2002 and claims benefit of 60/391,777 06/25/2002 and claims benefit of 60/387,292 06/07/2002 and claims benefit of 60/334,301 11/28/2001 and claims benefit of 60/334,233 11/28/2001 and said PCT/US03/31974 10/08/2003 is a CIP of 10/360,770 01/06/2003 ABN which is a CIP of 10/287,994 11/05/2002 which is a CON of PCT/US02/32263 10/09/2002 which claims benefit of 60/407,527 08/28/2002 and claims benefit of 60/404,249 08/16/2002 and claims benefit of 60/396,594 07/17/2002 and claims benefit of 60/391,777 06/25/2002 and claims benefit of 60/387,292 06/07/2002 and claims benefit of 60/334,301 11/28/2001 and claims benefit of 60/334,233 11/28/2001 and claims benefit of 60/344,692 10/19/2001 and claims benefit of 60/328,523 10/10/2001 and said PCT/US03/31974 10/08/2003 is a CIP of 10/360,779 02/19/2003 ABN and is a CIP of 10/410,945 04/09/2003 which is a CIP of PCT/US02/32263 10/09/2002 and claims benefit of 60/407,527 08/28/2002 and claims benefit of 60/404,249 08/16/2002 and claims benefit of 60/396,594 07/17/2002 and claims benefit of 60/391,777 06/25/2002 and claims benefit of 60/387,292 06/07/2002

** FOREIGN APPLICATIONS *****

UNITED STATES OF AMERICA PCT/US02/32263 10/09/2002

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY PA	SHEETS DRAWING 498	TOTAL CLAIMS 77	INDEPENDENT CLAIMS 11
ADDRESS 43850					
TITLE Erythropoietin: remodeling and glycoconjugation of erythropoietin					
FILING FEE RECEIVED 4780	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		